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APPLICANTS

Michael Georg Pauliks, Fishkill, NY;
Michael Lee Bundy, Hernando Beach, FL;
Thomas Robert Ervolina, Hopewell Junction, NY;
Darrell Lavern Harrod, Wake Forest, NC;
James Kanuch, Powell, OH;
Amanda Kotecki, Hillsborough, NC;
Grant Lindsey MacKay, Concord, NC;
Sarah Elizabeth Santo, Poughkeepsie, NY;

**** CONTINUING DATA ******* *cy* *None*

**** FOREIGN APPLICATIONS ******* *cy* *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 09/11/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 5	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>Carminu</i> Initials <i>cy</i>				

ADDRESS

Philmore H. Colburn II
Cantor Colburn LLP
55 Griffin Road South
Bloomfield, CT 06002

TITLE

Method and system for master planning priority assignment

FILING FEE RECEIVED 1166	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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